

Healthy Communities Access Program Update

Susan Lumsden

Branch Chief, Health Care Systems Branch

Division of State and Community Assistance/ BPHC/ HRSA

HCAP All Grantee Meeting

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Washington, DC

HCAP: Where we've been, Where we are

- FY 2000: \$25 Million to support first 23 CAP communities
- FY 2003: \$105 Million to support 35 New HCAP Communities and Continuations
- To Date: CAP & HCAP have supported 193 grantees in 44 states and the District of Columbia

HCAP: Our Purpose

The purpose of the Healthy Communities Access Program (HCAP) is to assist communities and consortia of health care providers and others to develop or strengthen **integrated community health care delivery systems** that **coordinate** health care services for individuals who are **uninsured or underinsured**, and to develop or strengthen activities related to **providing coordinated care for individuals with chronic conditions** who are uninsured or underinsured.

HCAP: Our Expectations

The **coordination of services** through the HCAP grant will allow the uninsured and underinsured to gain entry into and receive services from: *a more **efficient, comprehensive and higher quality system of care, regardless of ability to pay.***

The **infrastructure development** supported by HCAP will result in a **health care delivery system** characterized by: ***effective collaboration, information sharing, and clinical and financial coordination** among providers and organizations in the community.*

HCAP: Our Goals

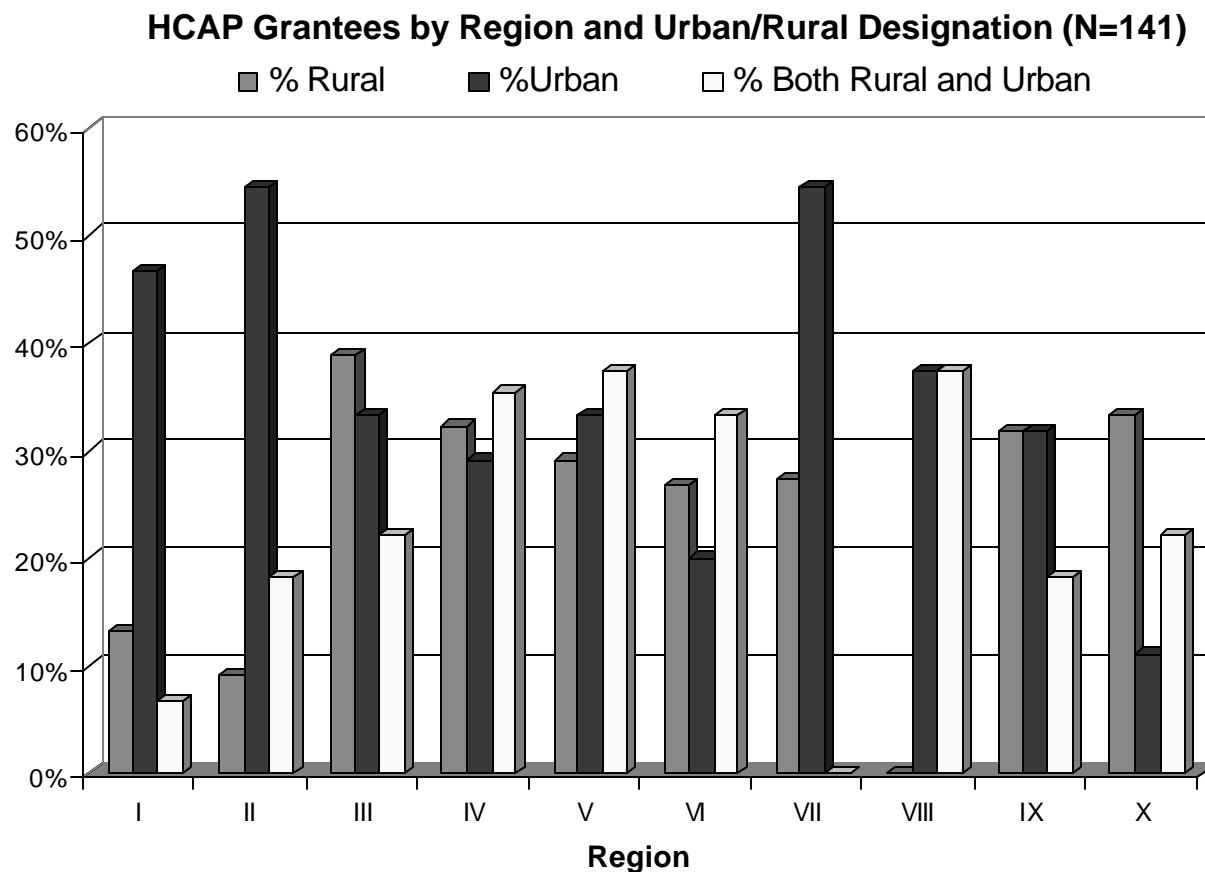
- Improving the **Effectiveness , Efficiency and Coordination** of services for uninsured and underinsured individuals
- The provision of **Better Quality Health care** for these populations **at Lower Cost**

...than would have been possible in the absence of HCAP program activities.

Who are our Grantees?



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Service Area Type Reported by FY 03 HCAP Grantees:

- 40% urban;
- 31% rural;
- 29% serving blended rural, urban, tribal and other communities

Who are our Grantees?

Your consortia represent a broad array of community stakeholders:

- 73% include Federally Qualified Health Centers
- 72% include Local Health Departments
- 59% include Community Based Social Service Organizations
- 57% include Private Hospitals
- 54% include Local Government
- 51% include Other Community Health Centers
- 53% include Public Hospitals
- 40% include Faith Based Organizations
- 39% include Mental Health Programs
- 35% include Private Providers & Group Practices

Who do we serve?

Based on the most recent round of HCAP applications, grantees reported having:

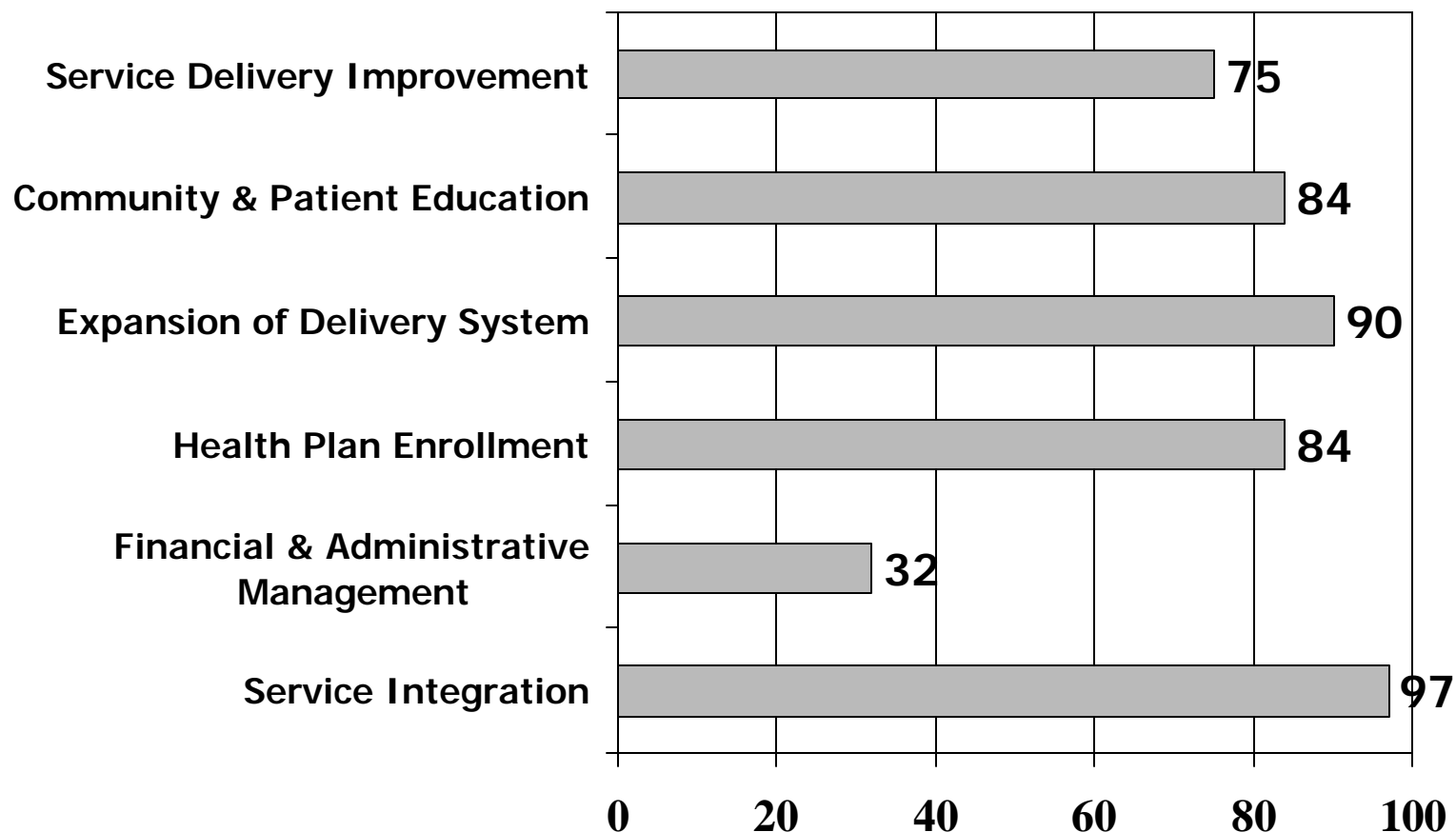
- A median estimated service area population of 208,000
- A median estimated rate of uninsurance of 21% for their service area, higher than the National Average of 15.2%

HCAP: What it means...

- **Community Assets and HRSA Programs Get Integrated at the Community Level**
- Capacity of existing safety net providers is coordinated and enhanced
- Collaboration and Community Linkages are strengthened
- Gaps or duplication in services for the uninsured and underinsured are eliminated
- Resources are leveraged

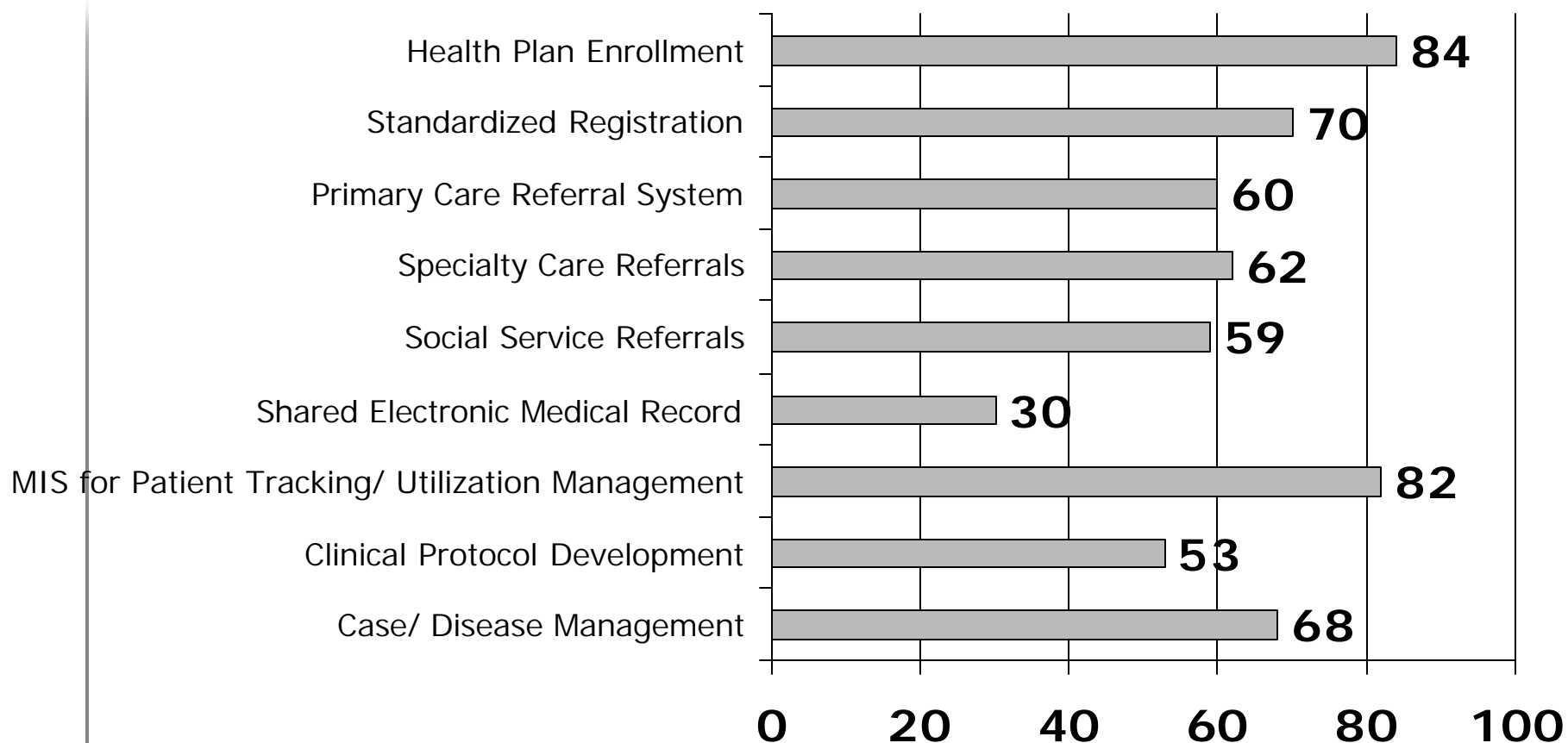
Percent of Grantees Implementing Infrastructure and Systems Activities by Category of Activity

(n=158, Reference Period: 3/03-8/03)



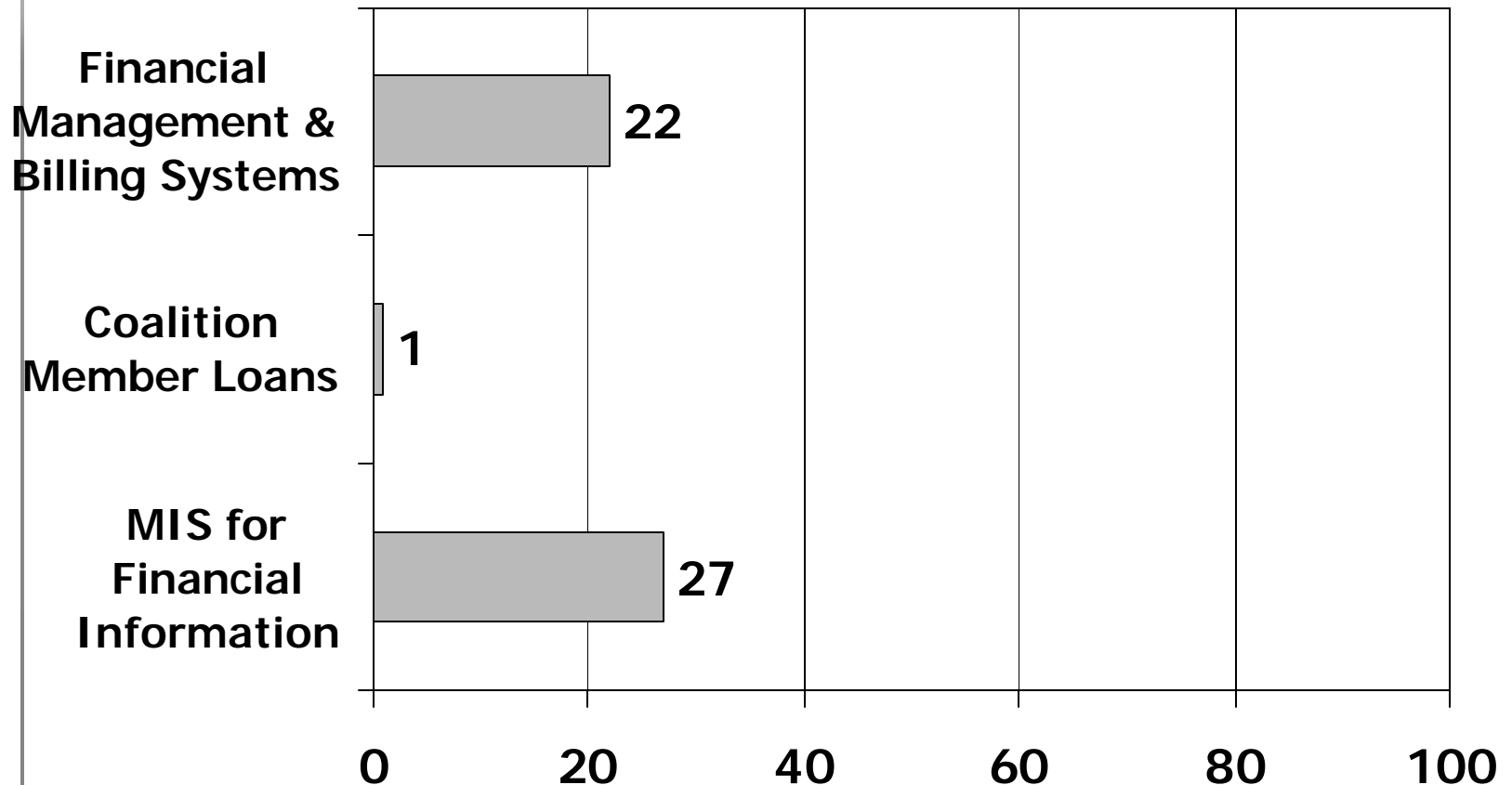
Percent of Grantees Implementing Service Integration Activities

(n=158, Reference Period: 3/03-8/03)



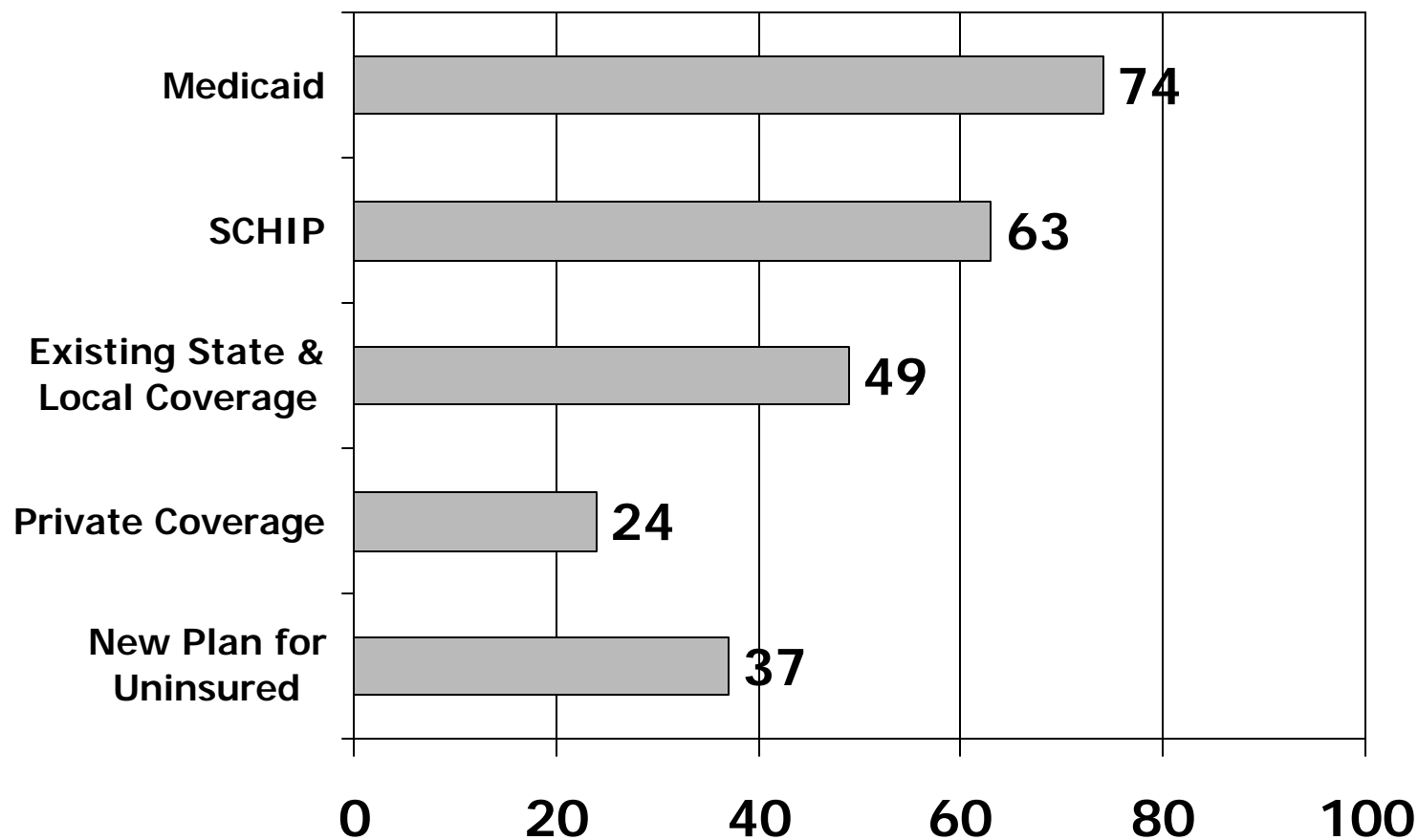
Percent of Grantees Implementing Financial & Administrative Management Activities

(n=158, Reference Period: 3/03-8/03)

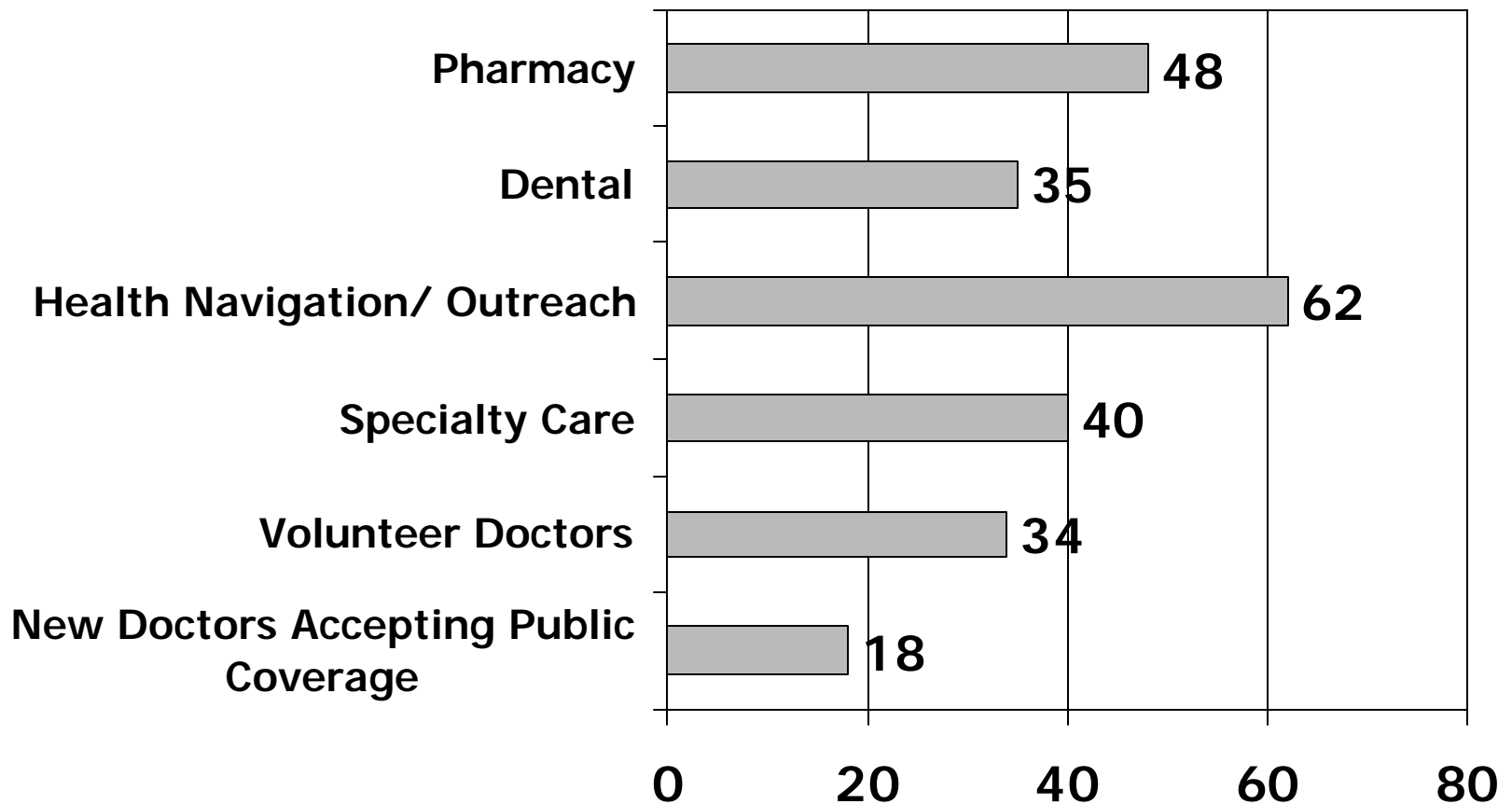


Percent of Grantees Implementing Health Plan Enrollment Activities

(n=158, Reference Period: 3/03-8/03)

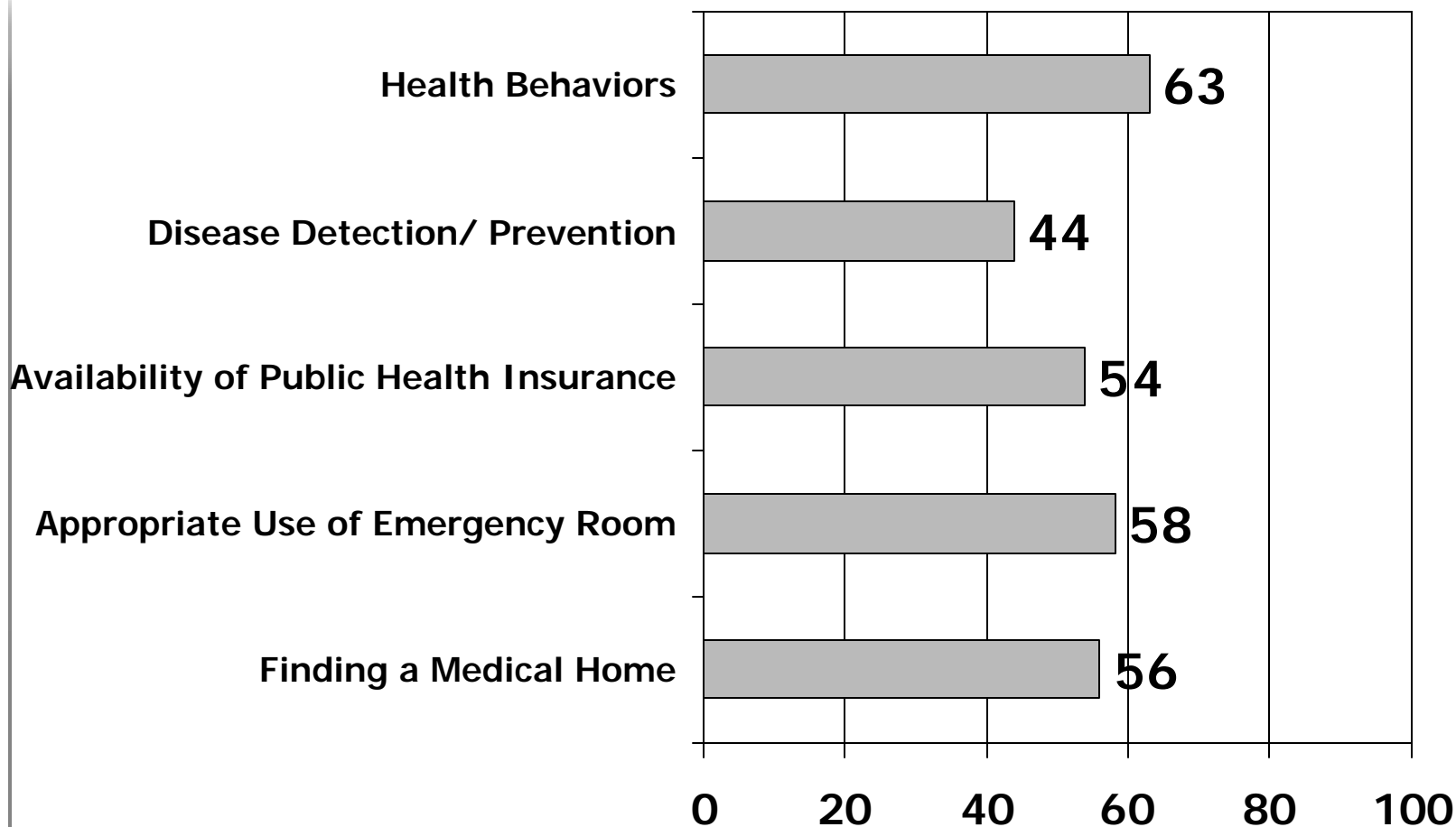


Percent of Grantees Implementing Delivery System Expansion Activities (n=158, Reference Period: 3/03-8/03)



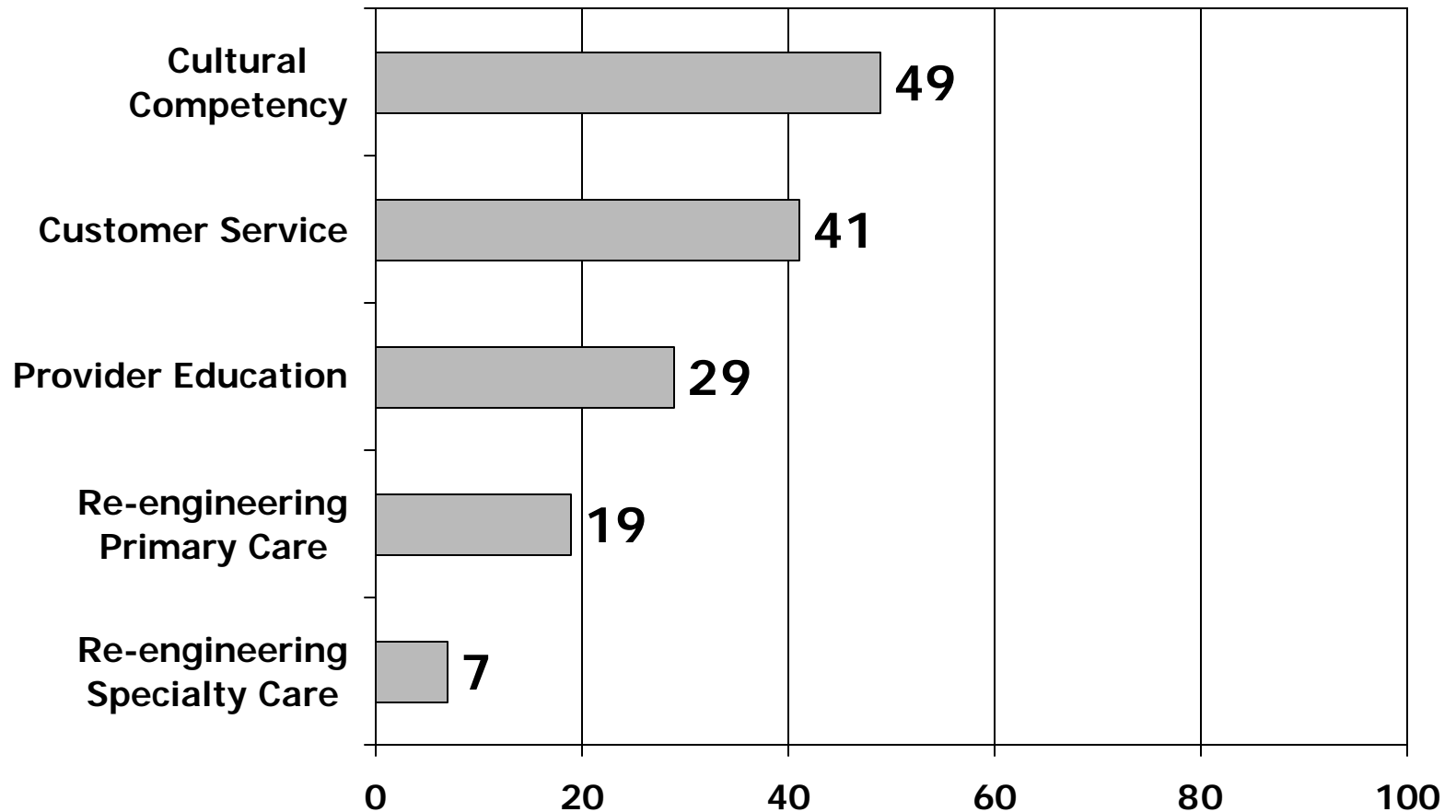
Percent of Grantees Implementing Community & Patient Education Activities

(n=158, Reference Period: 3/03-8/03)



Percent of Grantees Implementing Service Delivery Improvement Activities

(n=158, Reference Period: 3/03-8/03)



HCAP: Leveraging Other Funding Sources

Grantees leverage a variety of other funding for their activities:

21% receive funds from Local Foundations

19% receive funds from State Government

14% receive funds from National Foundations

13% receive funds from other Federal Sources

12% receive funds from Hospital Organizations

11% receive funds from County Government

HCAP: Leveraging In-Kind Contributions

Grantees leverage a variety of in-kind contributions:

30% receive these from Private Hospitals

25% receive these from FQHCs

24% receive these from Local Health Departments

20% receive these from Various Other sources

19% receive these from Public Hospitals

18% receive these from Private Provider/Group Practices

HCAP: Products and Tools

Grantees are developing a wide variety of products and tools (in full or in part) with CAP/HCAP funds:

- **809** various products & tools
- 82% are currently available

Examples include:

- Case Management/Disease Management Protocols
- Websites
- Data Collection Tools
- Patient Education Materials
- Resource Directories

Program Tools & Resources Update

Program Monitoring and Data Collection

- Six-month Project Updates moved from Paper-Based to Web-Based submission
- Incorporated into Data Management System (DMS) with multiple capabilities

Program Monitoring and Data Collection

Uses of Data:

- To assist in program management and monitoring
- To support peer-to-peer technical assistance for grantees
- To inform a variety of stakeholders on grantee activities
- As a key primary data source for national evaluation

Program Monitoring and Data Collection: The Six-Month Project Update Tool

- Completed twice annually, with a 30-day window available to compile and submit data.
- Tool was designed to document progress over time
- Imperative that all data reported for each six-month increment does not extend beyond the specified reference period
- Report currently has Twelve parts used to capture different kinds of information

Six-month Project Updates: Data Collection to Date

	9/00 – 2/01	3/01 – 8/01	9/01 – 2/02	3/02 – 8/02	9/02 – 2/03	3/03 – 8/03
9/00 (n=23)	?	?	?	+	+	+
3/01 (n=53)		?	?	+	+	+
9/01 (n=60)			?	+	+	+
9/02 (n=22)					+	+
9/03 (n=35)						

? Paper-based data collection

+ Web-based data collection

Six-month Project Updates:

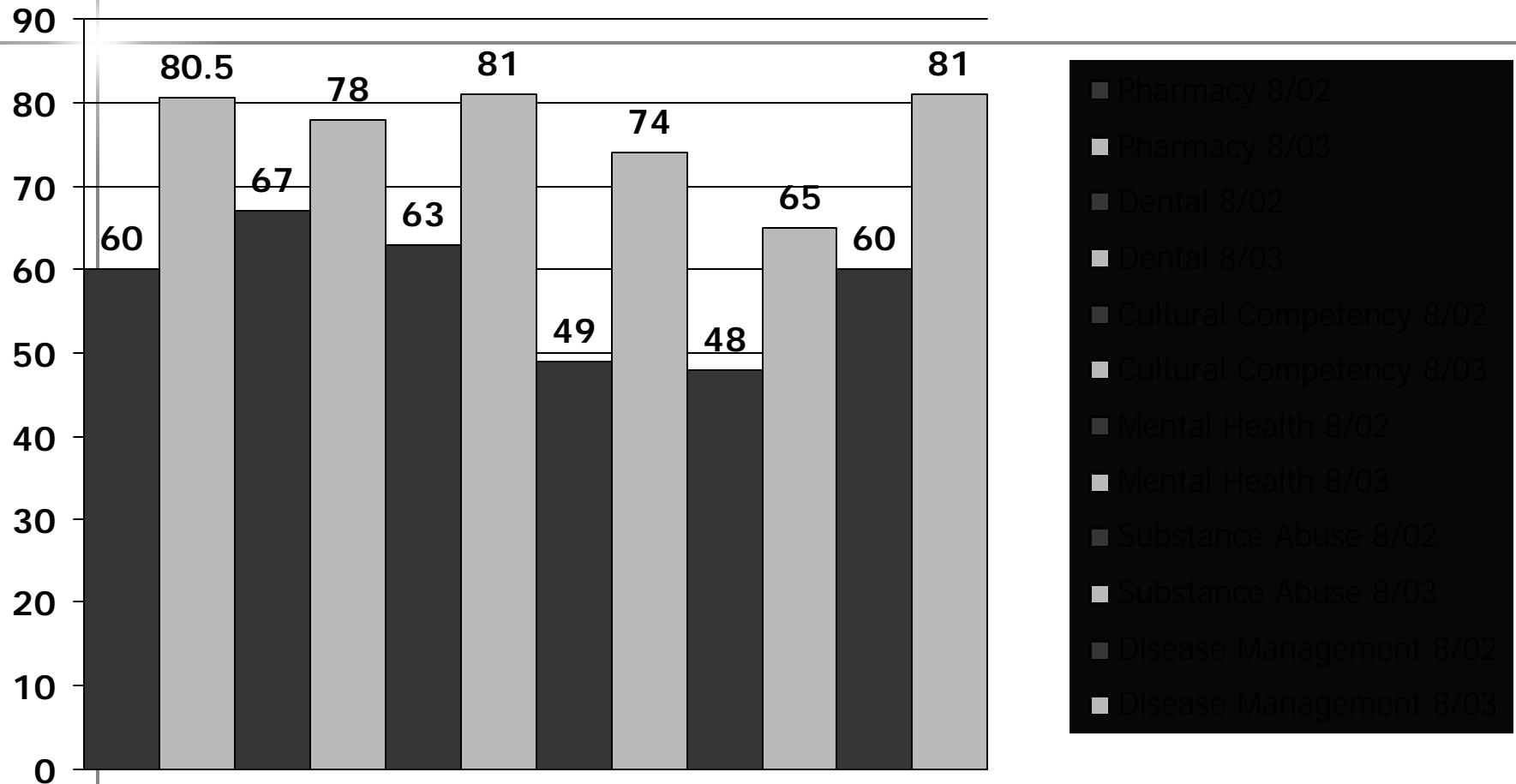
Possible Future Modifications

- Further focus on progress on Collaboration and Sustainability
- Reviewing existing activity clusters and sub-activities to reduce duplicative/confusing outputs and improve output data
- Adding capability for further description of individual grantee Activities, Goals and Measures of Success
- Creating space for individual grantee Baselines and Benchmarks

Program Monitoring and Data Collection: Grantee Activity Progress

- Over past 18 months, a number of grantees have advanced their various activities to the early or fully operational stage from the developmental stage.

Activity Development: Percentage of Grantees in Operational Status August 2002 vs. August 2003



Program Monitoring and Data Collection:

Query Capabilities:

- Grantee Activities Tool
- Grantee Collaborative Members Tool
- Grantee Products Tool
- Grantee Funding/In-kind Information Tool
- Primary Contact Information

Program Monitoring and Data Collection: Efforts in Progress

- Project Locations Query Tool
- Community Profile: Descriptive/
Demographic Data
- Compendium: Project Summaries

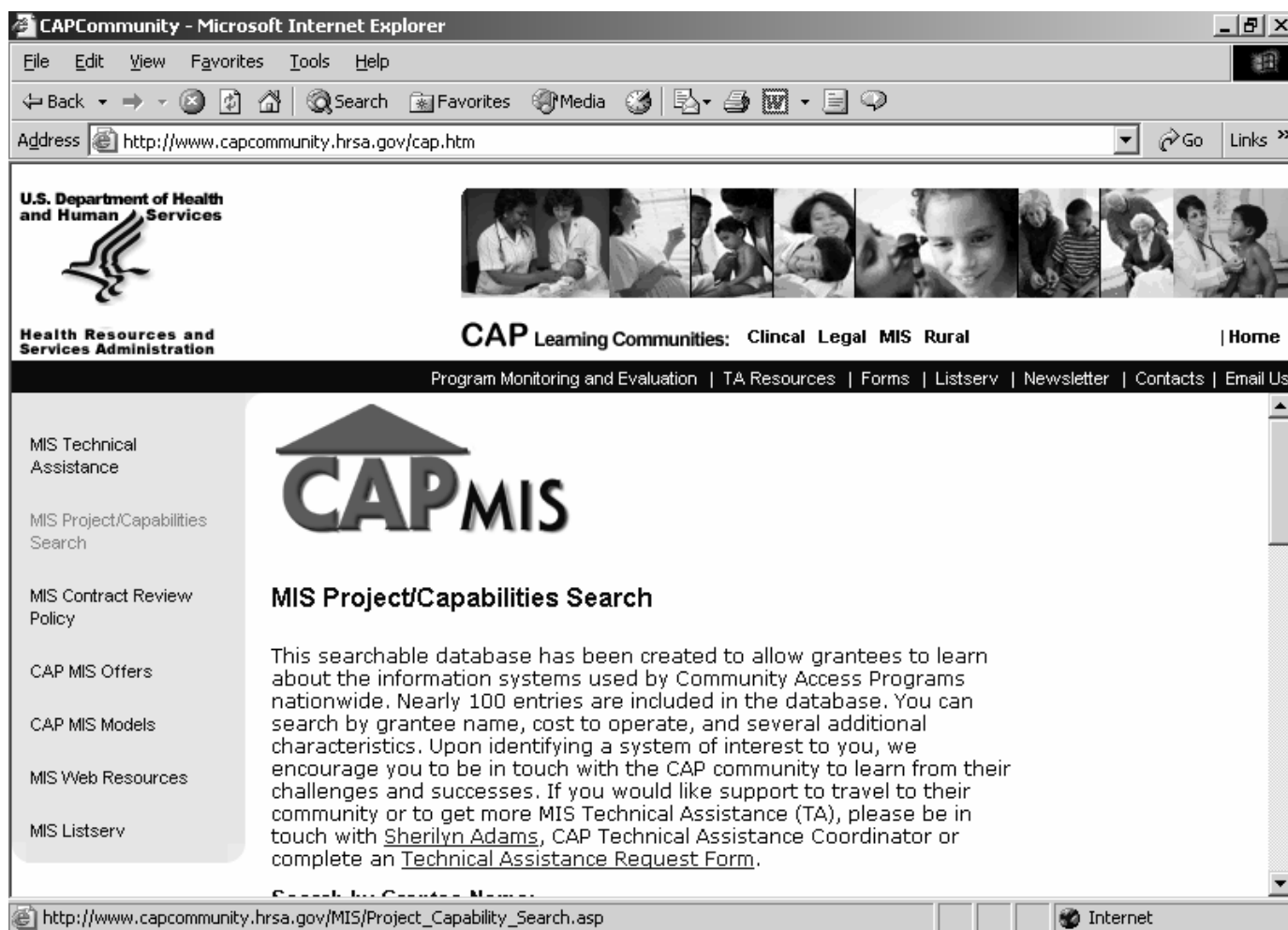
Grantee Website

<http://www.capcommunity.hrsa.gov>

The HCAP Grantee Website Continues to Offer:

- Important updates and communication tools
- CAPStone, the grantee newsletter
- Technical Assistance information and request form
- Program and due date information
- Access to the grantee Data Management System and much, much more!!!!

Grantee Website: MIS Project/ Capabilities Database Updated



Grantee Website: MIS Project/ Capabilities Database Updated

- Data available on 144 Grantees
Developing or Enhancing Information
Systems
- System-wide focuses include:
 - Referral management
 - Chronic disease management
 - Pharmaceutical assistance
 - Patient indices
 - Provider databases & directories

Grantee Website: Efforts in Progress

- Online MIS Database Update Form
- Revitalization of Grantee Listserv
- Grant and Project Management Pages

Technical Assistance

HCAP has a variety of TA resources available to support the varied needs of grantee consortia.

Examples include:

- MIS Related Assistance
 - **Peer to Peer Assistance from fellow grantees!**
 - Pharmacy Program Planning
 - Business/Financial Issues
 - Evaluation
- & much, much more...**

Program Evaluation: Efforts to Date

- Studies to Date
 - New York University/ Rutgers: Program Implementation Study
 - The First Six Months
 - The First Eighteen Months
 - Navigant Consulting: Descriptive Case Studies in Three Areas
 - Health Center Expansion
 - Disease Management
 - Sustainability

National Evaluation: Future Directions

- Partnering with BPHC Office of Policy, Evaluation, and Data to lead the HCAP National Evaluation
- Request for Contract for National Evaluation in progress
- Important and exciting step in describing the HCAP program and its outcomes as a whole, not only for September 2005 report to Congress, but to many other stakeholders as well

Celebrate & Share Your Accomplishments!

- Breakout Sessions
- HCAP Goes to the Movies
- Products and Tools Showcase

Q & A